Supporting Students with Emotional and Behavioral Disorders: Lessons Learned Mary Margaret Kerr (mmkerr@pitt.edu; www.sbbh.pitt.edu)

Our goals today:

- 1. Explore a few practical implementation guidelines
- 2. Identify mistakes we see in districts
- 3. Identify some examples of low or no-cost resources to prevent those mistakes
- 4. Maximize your resources and results.

Six lessons learned:

1. Adopt a comprehensive framework.

- Every school district needs universal, targeted, and intensive supports.
- Be sure all staff as well as parents know to access these supports.

2. Avoid silos. The process at the school and district level should be integrated so that ii

- Students don't get "lost in the cracks
- Staff don't replicate or undo each other's efforts
- Outcomes are available for review
- Costs are contained.
- Students with IEPs do not become scapegoats for low performing schools.

3. Primary prevention is good practice.

- Applied through the efforts of all school staff and across all students
- Often overlooked, these are real time- and money-savers.

Free or low-cost universal interventions that are often overlooked

- Check the readability of all communications with parents.ⁱⁱⁱ
- Survey all staff about their behavioral expectations and interventions. Then meet and come to agreement on those *before* the year begins.^{iv}
- Incorporate protective processes in your classroom "look fors."
- Teach warning signs, risk factors and barriers to learning. http://www.sbbh.pitt.edu

4. Improve targeted interventions to support those at risk.

- Typically delivered in small groups.
- A "booster" to strengthen universal interventions.
- Often delivered without consideration of outcomes.

Common problems with targeted interventions

• Delivered by outside providers whose work is not well integrated with other school processes (e.g., PBIS, School-based MH, RtI).

- Providers have to locate students for groups
- Appropriateness of referrals is a problem
- School staff may not know exactly "what they do in group," so there is no transfer of learning.
- May not be tied to BIPs, IEPs, or any outcome measures (e.g., an anger management group with no review of discipline referrals or FBAs)

5. Intensive interventions---or are they?

- Should ameliorate the effects of a serious problem, so that students can learn.
- Require expertise to implement and monitor correctly.

Typical problems with planning for intensive interventions

- The assessment and planning process is rushed to meet deadlines.
- The student's own preferences are overlooked.
- Compliance trumps best practice.
- Incomplete FBAs
- Confusing BIPs that are not monitored over time and adjusted.
- Limited distribution of IEPs to those who need to use them.
- The BIP and IEP do not take account of all the times in the school day.

Common Problems with Intensive Interventions

- The wrong intervention is selected.vi
- Interventions are NOT intensive!
- There is no attempt to work on generalization, so recidivism is common.
- The outcome measures are poorly conceived and do not prepare the student for less restrictive placements or typical general education settings.

Common Problems with IEP Meetings

- No one wants to attend them!
- They are too short and too infrequent to be of any real utility.
- They do not begin with asking the parent to share their perspectives.
- They do not function as planning meetings but rather as a way to fulfill compliance requirements.
- Parents do not understand them.

Avoid costly mistakes: Six suggestions to avoid wasting money, time, and good will.

1. Don't overfunction.

- 1. Other agencies and individuals will underfunction.
 - Courts
 - Human Services

Parents

2. Watch the "timesavers."

- Inadequate assessment and planning.
- Hasty communications, especially with parents and underperforming employees
- Misuse of e-mail
- Partial implementation of programs
- Multitasking on critical issues
- Postponing policy development
- "School law by PowerPoint"
- An example

3. Insist on boundaries.

- Don't allow staff to use school resources for their personal use.
 - o Time
 - o Materials
- Doing for parents instead of coaching them how to take care of their children.vii
- "Rescue fantasy"

4. Be careful what you pay for.

- Is there a cost-efficient alternative?
- Government resourcesviii
- Existing processes and infrastructures such as RtI, Multidisciplinary teams
- Can you share resources?
 - School-based health partnerships
- Can you use a different approach?
 - Rather than hire a grant writer, use a contingency basis; good grant writers can pay for themselves.

5. Focus on crisis <u>prevention</u> not on crisis <u>responding</u>.

- Interview students about their angerix
- Have a safety plan for every student who has control problems
- Practice the plans to be sure they---and the people involved—really work out.

6. Pay attention to research on adult burnout and adult health promotion.

- Staff absenteeism is expensive.
- Warning signs for burnout are:
 - o Ineffectiveness
 - Cvnicism
 - Exhaustion
- Burnout often leads to other costs and problems, such as

- Coercive classroom practices
- Lack of innovation
- Confrontations with parents and colleagues

Resources For Your Use

i www.pbis.org
www.pbis.org/links/pbis network/utah.aspx
http://www.updc.org/pbis_rti/ (Resources on PBIS)

- iii Microsoft Office 2007-Word Document-
- Click the Microsoft Office Button, and then click Word Options.
- Click Proofing.
- Make sure **Check grammar with spelling** is selected.
- Under **When correcting grammar in Word**, select the **Show readability statistics** check box.
- iv http://www.sbbh.pitt.edu/files/pdf/Universal%20Standards%20Manual mwv09 04 08.pdf (Guide to Surveying All Staff in the Development of School-wide Rules)
- v http://www.sbbh.pitt.edu/For-Youth/10/default.aspx (How You Can Help Me Student Self-Advocacy Booklet)
- vi http://www.sbbh.pitt.edu/Aggression/26/Default.aspx (Resources on Understanding Different Pathways to Aggression and to Selecting the Right Interventions)
- vii Excellent texts for professionals, parents, and youth can be found on the COPE, CARE, DEAL web site (www.copecaredeal.org). This site is funded by the Annenberg Trust through its Adolescent Mental Health Initiative and is extensively peer-reviewed by experts. "The Initiative creates books and web materials for adolescents on topics including depression, bipolar disorder, anxiety, schizophrenia, and suicide prevention" (description from Cope, Care, Deal website).
- viii http://www.nationalguidelines.org/ (National Guidelines on Health, Mental Health, and Safety, With Many Free Resources) and
- <u>http://nichcy.org/disability/specific/emotionaldisturbance#info</u> (National Center for Parents of Children with Disabilities)
- ix http://www.sbbh.pitt.edu/Default.aspx?webPageID=117 (Resources on Anger Management)

ii http://www.ncset.org/publications/viewdesc.asp?id=1097 (Resource on Integrating Special/General Education)